



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E267187**

INTERSTATE <input type="checkbox"/>	CITY STREET <input checked="" type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

CASE #	13-02150
LOCAL AGENCY CODING	
TOTAL # OF UNITS	03
OBJECT STRUCK	

TRIBAL RESERVATION						
M M D D Y Y Y Y	TIME (2400)	COUNTY #	MILES	CITY #		
DATE OF COLLISION	08 - 29 - 2013	1720	31	N S E W	IN OF	0664

ON (PRIMARY TRAFFIC WAY)	INTERSECTION <input checked="" type="checkbox"/>	NON-INTERSECTION <input type="checkbox"/>
LUNDEEN PARK WAY	BLOCK NO. <input checked="" type="checkbox"/>	10400
MILE POST		
DISTANCE	MILES	OF (REFERENCE OR CROSS STREET)
		VERNON ROAD

UNIT 01	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL CYCLE <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE
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LAST NAME	MORRIS	FIRST NAME	JENNIFER	MIDDLE INITIAL	N
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STREET NEW ADDRESS	3110 74TH DR NE
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CITY	MARYSVILLE	ST	WA	ZIP	982706811
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CDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #	MORRIJN154BA	STATE	WA	SEX	F	D.O.B.	MMDDYYYY	01	01	1985
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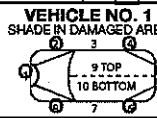
ON DUTY	STATUS	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE	INJURY CLASS	1	NATURE OF INJURIES
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LICENSE PLATE #	609WDT	STATE	WA	VIN#	JM3ER293770149284
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TRAILER PLATE #	STATE	TRAILER PLATE #	STATE
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VEH. YEAR	2007	MAKE	MAZD	MODEL	CX74D	STYLE	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
REGISTERED OWNER INFO. JENNIFER MORRIS 3110 74TH DR NE MARYSVILLE WA 98270									

LIABILITY INSURANCE IN EFFECT	<input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	PROGRESSIVE 70857667	VEHICLE LEGALLY STANDING YES <input type="checkbox"/> NO <input type="checkbox"/>	CITATION #	CHARGE
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UNIT 02	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL CYCLE <input type="checkbox"/>	PEDESTRIAN <input type="checkbox"/>	PROPERTY OWNER <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE
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LAST NAME	SHERMAN	FIRST NAME	ASHLEY	MIDDLE INITIAL	N
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STREET NEW ADDRESS	312 95TH DR SE
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CITY	LAKE STEVENS	ST	WA	ZIP	982583907
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CDL	RESTRICTIONS	B	ENDORSEMENTS
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DRIVER'S LICENSE #	SHERMAN173P0	STATE	WA	SEX	F	D.O.B.	MMDDYYYY	10	20	1983
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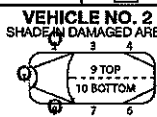
ON DUTY	STATUS	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE	INJURY CLASS	1	NATURE OF INJURIES
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LICENSE PLATE #	AEP0053	STATE	WA	VIN#	2C3LA53G47H764427
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TRAILER PLATE #	STATE	TRAILER PLATE #	STATE
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VEH. YEAR	2007	MAKE	CHRY	MODEL	3004D	STYLE	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
REGISTERED OWNER INFO.									

LIABILITY INSURANCE IN EFFECT	<input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	STATE FARM 121 6303 C17 47B	VEHICLE LEGALLY STANDING YES <input type="checkbox"/> NO <input type="checkbox"/>	CITATION #	CHARGE
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OFFICER'S NAME (PRINT)	DENNIS IRWIN	BADGE OR ID #	105	AGENCY	WA0311900
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STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E267187**

CASE # **13-02150**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)		MORRIS SERENITY G																	
ADDRESS & PHONE #		3110 74TH DR NE MARYSVILLE WA 982706811																	
SEX		F		D.O.B. MMDDYYYY		08		- 05		- 2007									
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #	1	SEAT POS.	9	AIRBAG	2	RESTR.	8	EJECT	1	HELMET USE		INJURY CLASS	0	NATURE OF INJURIES	
NAME (LAST, FIRST, MIDDLE INITIAL)		MORRIS CARVIN E																	
ADDRESS & PHONE #		3110 74TH DR NE MARYSVILLE WA 982706811																	
SEX		M		D.O.B. MMDDYYYY		02		- 19		- 2010									
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #	1	SEAT POS.	8	AIRBAG	2	RESTR.	6	EJECT	1	HELMET USE		INJURY CLASS	1	NATURE OF INJURIES	
NAME (LAST, FIRST, MIDDLE INITIAL)		SHERMAN SOPHIA C																	
ADDRESS & PHONE #		312 95TH DR SE LAKE STEVENS WA 982583907																	
SEX		F		D.O.B. MMDDYYYY		11		- 23		- 2007									
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #	2	SEAT POS.	9	AIRBAG	2	RESTR.	8	EJECT	1	HELMET USE		INJURY CLASS	1	NATURE OF INJURIES	

NARRATIVE

UNIT #3 was eastbound on Lundeen Park Way approaching the traffic circle at the 10500 block. UNIT #3 came to a stop for a pedestrian in the crosswalk and was struck from behind by UNIT #1.

UNIT #1 had been traveling eastbound Lundeen Park Way, behind UNIT #3 and was unable to stop in time and avoid the collision with UNIT #3 when UNIT #3 stopped for a pedestrian.

UNIT #2 had also been traveling eastbound on Lundeen Park Way, behind UNIT #1 and was unable to stop in time and avoid the collision with UNIT #1 who had struck UNIT #3.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

INVESTIGATING OFFICER'S SIGNATURE DENNIS IRWIN		UNIT OR DIST. DET.		DATED 09-02-13 09:38 AM		PLACE SIGNED	
APPROVED BY BOB SUMMERS 079				DATE 9/3/2013 8:27:49 AM			
BADGE OR ID # 105		ORI # WA0311900		TIME POLICE DISPATCHED 5:21 PM		TIME POLICE ARRIVED 5:22 PM	



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E267187**

CASE # **13-02150**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)		MATTSON MALACHI S														
ADDRESS & PHONE #		519 4TH ST SULTAN WA 98294														
PASSENGER	<input checked="" type="checkbox"/> WITNESS	UNIT #	3	SEAT POS.	5	AIRBAG	2	RESTR.	6	EJECT	1	HELMET USE		INJURY CLASS	1	NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)																
ADDRESS & PHONE #																
PASSENGER	<input type="checkbox"/> WITNESS	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)																
ADDRESS & PHONE #																
PASSENGER	<input type="checkbox"/> WITNESS	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES

NARRATIVE

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DENNIS IRWIN		09-02-13 09:38 AM	
INVESTIGATING OFFICER'S SIGNATURE	UNIT OR DIST. DET	DATED	PLACE SIGNED
APPROVED BY BOB SUMMERS 079		DATE 9/3/2013 8:27:49 AM	
BADGE OR ID # 105	ORI # WA0311900	TIME POLICE DISPATCHED 5:21 PM	TIME POLICE ARRIVED 5:22 PM



SUPPLEMENTAL
POLICE TRAFFIC
COLLISION REPORT



013197

REPORT NO. **E267187**

CASE # **13-02150**

COMMERCIAL MOTOR CARRIER

INTERSTATE ☐

INTRASTATE ☐

UNIT #

USDOT

ICC #

VEHICLE TYPE

CARGO BODY TYPE

CARRIER NAME

CARRIER ADDRESS

CITY

ST

ZIP

NAME SOURCE

AXLES

GWR

PLACARD

NAME IF NO NUMBER

ADDITIONAL UNITS

UNIT #

3

MOTOR VEHICLE ☒

PEDAL CYCLE ☐

PEDESTRIAN ☐

PROPERTY OWNER ☐

DAMAGE THRESHOLD MET YES ☒ NO ☐

PHONE

LAST NAME

MATTSON

FIRST NAME

JAMI

MIDDLE INITIAL

D

STREET NEW ADDRESS ☒

519 4TH ST

CITY

SULTAN

ST

WA

ZIP

98294

CDL

RESTRICTIONS

ENDORSEMENTS

DRIVER'S LICENSE #

MATTSJD196R9

STATE

WA

SEX

F

D.O.B. MMDDYYYY

12

-

29

-

1981

ON DUTY ☐

STATUS

AIRBAG

2

RESTR

4

EJECT

1

HELMET USE

INJURY CLASS

1

NATURE OF INJURIES

LICENSE PLATE #

AJE7238

STATE

WA

VIN#

4N2DN11W4RD839244

TRAILER PLATE #

STATE

TRAILER PLATE #

STATE

VEH. YEAR

1994

MAKE

NISS

MODEL

QUESW

STYLE

VEHICLE TOWED YES ☐ NO ☒

TOWED BY

GOVT VEHICLE YES ☐ NO ☒

REGISTERED OWNER INFO.

LIABILITY INSURANCE IN EFFECT ☐

INSURANCE CO & POLICY #

VEHICLE LEGALLY STANDING YES ☒ NO ☐

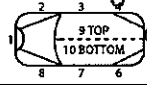
CITATION #

3Z0512384

CHARGE

OP MOTOR VEH WITHOUT

SHADE IN DAMAGED AREA



UNIT #

MOTOR VEHICLE ☐

PEDAL CYCLE ☐

PEDESTRIAN ☐

PROPERTY OWNER ☐

DAMAGE THRESHOLD MET YES ☐ NO ☐

PHONE

LAST NAME

FIRST NAME

MIDDLE INITIAL

STREET NEW ADDRESS ☐

CITY

ST

ZIP

CDL

RESTRICTIONS

ENDORSEMENTS

DRIVER'S LICENSE #

STATE

SEX

D.O.B. MMDDYYYY

ON DUTY ☐

STATUS

AIRBAG

RESTR

EJECT

HELMET USE

INJURY CLASS

NATURE OF INJURIES

LICENSE PLATE #

STATE

VIN#

TRAILER PLATE #

STATE

TRAILER PLATE #

STATE

VEH. YEAR

MAKE

MODEL

STYLE

VEHICLE TOWED YES ☐ NO ☐

TOWED BY

GOVT VEHICLE YES ☐ NO ☐

REGISTERED OWNER INFO.

LIABILITY INSURANCE IN EFFECT ☐

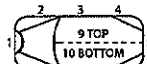
INSURANCE CO & POLICY #

VEHICLE LEGALLY STANDING YES ☐ NO ☐

CITATION #

CHARGE

SHADE IN DAMAGED AREA



I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

DENNIS IRWIN

09-02-13 09:38 AM

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST DET

DATED:

PLACE SIGNED

BADGE OR ID #

105

ORI #

WA0311900

APPROVED BY

SUMMERS

DATE

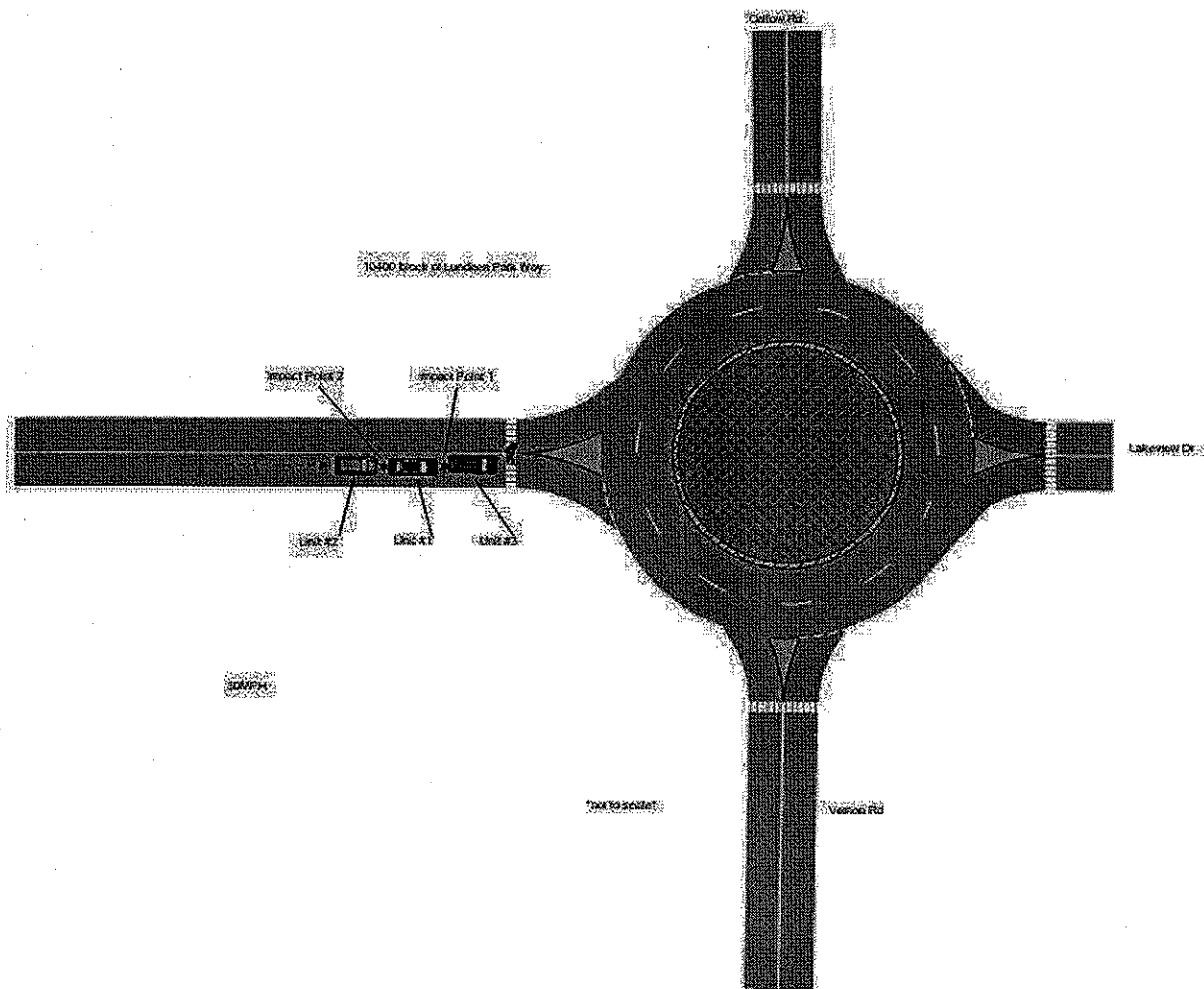
9/3/2013

PAGE

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OF

5



LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

13 02150

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Sherman Ashley Nicole	RACE W	ETH	SEX F	DOB 10-20-83	AGE 29	HGT 5'5"	WGT 110	HAIR BL	EYES Hazel
STREET ADDRESS 312 95th Dr SE		CITY Lake Stevens		STATE WA		ZIP 98258		RES. STATUS		
HOME PHONE 425-446-0972		CELL PHONE 425-446-0972		PLACE OF EMPLOYMENT Self / Everett massage Clinic						
WORK PHONE		EMAIL ADDRESS ashleynsherman@hotmail.com								

I, Ashley Sherman, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I was driving east bound on Lundeen Parkway, I was starting to make the circle around the round about when my 5yr old daughter in the back seat told me she was choking on a mint. I reached back to give her a bottle of water in panic. ~~When~~ I felt my car hit the car in front of me. When I looked forward, I saw that when I hit the car, she hit the one in front of her. We pulled into the 1st driveway to the left and called 911. Everyone is ok - thank god!

my child is Sophia Sherman and was in a booster seat in the backseat passenger side.

[Handwritten signature]

CLERK
ORIGINAL

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: <i>[Signature]</i>	DATE SIGNED 8/29/13	LOCATION SIGNED Lundeen parkway
OFFICER/NUMBER: #105	DATE SIGNED 8/29/13	LOCATION SIGNED LAKE STEVENS, WA

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE 1 OF 1

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

13. 07150

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) MORRIS Jennifer Natasha	RACE WHITE	ETH	SEX F	DOB 01-01-85	AGE 28	HGT 53	WGT 105	HAIR Brown	EYES Brown
STREET ADDRESS 7505 58th PL NE		CITY Marysville		STATE WA		ZIP 98270		RES. STATUS		
HOME PHONE		CELL PHONE 425-870-8832		PLACE OF EMPLOYMENT stay at home mom						
WORK PHONE		EMAIL ADDRESS Rainedoutseattle@gmail.com								

I, _____, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

Driving kids to cheer practice east bound on Lunden Pkwy. Going into the round about Red Van in front of me slammed on breaks to allow a pedestrian to cross the cross walk. I bumped into her not being able to stop fast enough and the black car behind me, bumped into me. We pulled into the nearest street and exchanged info.

LSPD
ORIGINAL

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: Jennifer Morris	DATE SIGNED 8/29/13	LOCATION SIGNED
OFFICER/NUMBER: #105	DATE SIGNED 8/29/13	LOCATION SIGNED LAKE STEVENS, WA

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE 1 OF 1

Incident History for: #SS13019324

Case Numbers: \$SS13002150

Entered 08/29/13 17:21:10 BY SPCT04 SP0376
Dispatched 08/29/13 17:22:13 BY SPSC39 SP0331
Enroute 08/29/13 17:22:13
Onscene 08/29/13 17:22:44
Closed 08/29/13 18:17:06

Initial Type: ACC Initial Alarm Level: Final Alarm Level:

Final Type: ACC (ACCIDENT, NON-INJURY OR UNKNOWN) Pri: 2 Dispo: H

Police BLK: SS001 Fire BLK: AG1619 Map Page: 377F-6 Group: SS1 Beat: NORT

Src: T

Loc: CALLOW RD/LUNDEEN PARK WY , LKS (V)

Loc Info: ON CALLOW RD

Name: SHERMAN, ASHLEY

Addr:

Phone: 4254460972

/1721 (SP0376) ENTRY , CC, 3 VEH NON-INJ, NON-BL KING, 1/BLK CRYSLER 30
0 2/ RED NISSAN QUEST 3/ BLK MAZDA SUV
/1722 (SP0331) DISPER SS1935 #SS104 LAMBIER, OFFICER (JEFF)
/1722 ASSTOS SS1936 [CALLOW RD/LUNDEEN PARK WY , LKS]
#SS105 IRWIN, OFFICER (DENNIS)
/1722 ASSTOS SS1921 [CALLOW RD/LUNDEEN PARK WY , LKS]
#SS101 BARNES, OFFICER (JAMES)
/1723 ONSCNE SS1936 [10513 LAKE]
/1723 ONSCNE SS1936 [10513 LAKEVIEW]
/1724 CLEAR SS1921
/1726 ONSCNE SS1935
/1734 (SP0200) CLEAR SS1935
/1736 ASNCAS SS1936 \$SS13002150
/1743 NEWLOC SS1936 [12403 24 PL #3]
/1748 (SS105) *ONSCNE SS1936
/1803 (SP0200) NEWLOC SS1936 [PD]
/1817 CLEAR SS1936 D/H
/1817 CLOSE SS1936

LSPD
ORIGINAL